Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF TENNESSEE		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Angela First name Michele	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Biddix Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	3	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6167	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	2716 Hydes Ferry Rd	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Davidson County	Country
		If your mailing address is different from the one	County  If Debtor 2's mailing address is different from yours, fill it
		<b>above</b> , <b>fill it in here.</b> Note that the court will send any notices to you at this mailing address.	in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

a pre-printed address.

No. Go to line 12.

this bankruptcy petition.

order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. **Middle District of TN** (Ch 13 Dismissed 1/18/18 18-00280 District 03/14/2018) When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes.

Number, Street, City, State & Zip Code

If immediate attention is

Where is the property?

needed, why is it needed?

Or do you own any

property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

### Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

3/21/18 8:53AM Debtor 1 Angela Michele Biddix Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Angela Michele Biddix

Angela Michele Biddix

Signature of Debtor 2

Signature of Debtor 1

Executed on March 21, 2018

MM / DD / YYYYY

MM / DD / YYYYY

Caca	number	(if known)
Case	HUHHDEL	(II Kriowri)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mary Beth Ausbrooks	Date	March 21, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Mary Beth Ausbrooks		
Printed name		
Rothschild & Ausbrooks PLLC		
Firm name		
1222 16th Avenue South, Suite 12		
Nashville, TN 37212-2926		
Number, Street, City, State & ZIP Code		
Contact phone (615) 242-3996	Email address	notice@rothschildbklaw.com
3463 TN		
Bar number & State		

						3/21/18 8:53AM
Fill	in this informa	ation to identify your	case:			
Deb	otor 1	Angela Michele B				
Deb	otor 2	First Name	Middle Name	Last Name		
1	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Bank	kruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE		
Cas	se number					
(if kn	own)					heck if this is an mended filing
Of	ficial For	m 106Sum				
Su	mmary of	Your Assets	and Liabilities a	nd Certain Statistical Informatio	n	12/15
info	rmation. Fill οι	ut all of your schedule	es first; then complete t	e are filing together, both are equally responsib he information on this form. If you are filing amon k the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						ur assets lue of what you own
1.	Schedule A/E 1a. Copy line	<b>B: Property</b> (Official Foundation 55, Total real estate, for	orm 106A/B) rom Schedule A/B		\$	156,300.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B.		\$	17,293.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	173,593.00
Par	t 2: Summa	rize Your Liabilities				
						ur liabilities nount you owe
2.			laims Secured by Property mn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule L</i>	D \$	121,030.37
3.			Unsecured Claims (Official	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	33,589.35
				Your total liabilit	ies \$	154,619.72
Par	t 3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo		e /	\$	2,309.62
5.	Schedule J: Y Copy your mo	our Expenses (Official onthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$	1,047.00
Par	t 4: Answer	These Questions for	Administrative and Stat	tistical Records		
6.			er Chapters 7, 11, or 13? on this part of the form. C	Check this box and submit this form to the court with	n your othe	r schedules.
7.	<ul><li>Yes</li><li>What kind of</li></ul>	debt do you have?				

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_1,979.62

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	<b>Total claim</b>	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Best Case Bankruptcy

Fill in	this informa	ation to identify	your case and th	ie filina	n-			3/21/18 8:53/
Debto		Angela Mich		ııs ılılılığ	<b>.</b>			
20210		First Name		Name	Last Name			
Debto (Spouse	or 2 e, if filing)	First Name	Middle	Name	Last Name			
United	d States Bank	kruptcy Court for	the: MIDDLE DI	STRIC	T OF TENNESSEE			
Case	number							☐ Check if this is an
								amended filing
٠	-:-! <b>-</b>	400A/F	,					
_		m 106A/E	_					4044
		A/B: P	<u> </u>		only once. If an asset fits in more than o			12/15
_	lo. Go to Part 2 ′es. Where is t							
1.1	2716 Hydes Ferry Rd			What	t is the property? Check all that apply			
_	Street address, if available, or other description			Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount	of any secure	nims or exemptions. Put d claims on Schedule D: ns Secured by Property.	
				☐ Manufactured or mobile home	Current va	ue of the	Current value of the	
_	Nashville Dity	TN State	37218-0000 ZIP Code		Land Investment property	entire prop	erty? 6,300.00	portion you own? \$156,300.00
	Sity	Ciaio	211 0000		Timeshare	<del></del>		our ownership interest
				□ Who	Other has an interest in the property? Check one		(such as fee simple, tenancy by the a life estate), if known.	
				The had an interest in the property. Check one			Fee Simple	
_	Davidson							
	County						if this is con	munity property
				Othe	r information you wish to add about this i erty identification number:	`	,	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor '	1 <u>A</u>	ngela Mich	ele Biddix		Case number (if known)	3/21/18 8:53A
. Cars,	, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles		
□ No	)					
■ Ye	s					
3.1 N	Лаке:	Ford		Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
N	Model:	Edge Lim	nited	■ Debtor 1 only		ve Claims Secured by Property.
	/ear:	2008		Debtor 2 only	Current value of t	
		ate mileage:	121,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
_		ormation:	. velsiala	At least one of the debtors and another		
	Peptor	drives this	s venicie.	Check if this is community property (see instructions)	\$8,638	.00 \$8,638.00
	the do			rn for all of your entries from Part 2, includir		#0.000.00
				that number here		\$8,638.00
art 3:	Describ	e Your Perso	nal and Household It	ems		
)o you	own o	r have any l	egal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Exan	mples: N o	goods and f Major applian	urnishings nces, furniture, linens	s, china, kitchenware		
- 16	es. Des	scribe				
			(\$100), Washer	600), Dining Room (\$100), Kitchen App & Dryer (\$300), Misc Kitchenware (\$50) 0), Misc Furnishings (\$100), Patio Furn	), 3	\$1,900.0
Exan	0		· · ·	eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; music co	ollections; electronic devices
				aptop (\$50), Printer (\$50), Shredders (\$2 DVD Players (\$30)	25), Cell	\$655.0
Exam	mples: F o	other collection	figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, or othe	er art objects; stamp, coin,	or baseball card collections;
<b>■</b> Ye	es. Des	scribe				
			2 Fur Coats			\$2,000.00

Official Form 106A/B

Schedule A/B: Property

D	ebtor 1	Angela Michele Biddix	Case number (if known)	3/21/10 0.30Ai
9.		nent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipmer musical instruments	nt; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
		Describe		
10.	■ No	ms  ples: Pistols, rifles, shotguns, ammunition, and related equipm  Describe	ent	
11.	Clothes Examp		es, accessories	
		Clothing, Shoes, Jackets, Accessor	ies	\$2,000.00
12.	□ No Î	ry  ples: Everyday jewelry, costume jewelry, engagement rings, w  Describe	edding rings, heirloom jewelry, watches, gems, ξ	gold, silver
		Misc Jewelry, Misc Costume Jewelr	у	\$1,000.00
13.	Examp □ No □	arm animals  ples: Dogs, cats, birds, horses  Describe  1 Dog		\$0.00
14.	■ No	ther personal and household items you did not already list Give specific information	t, including any health aids you did not list	
15		the dollar value of all of your entries from Part 3, including art 3. Write that number here		\$7,555.00
		escribe Your Financial Assets		
D	o you ow	wn or have any legal or equitable interest in any of the follo	owing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	ples: Money you have in your wallet, in your home, in a safe do		on
17.	Examp	its of money  ples: Checking, savings, or other financial accounts; certificate institutions. If you have multiple accounts with the same		houses, and other similar
	□ No ■ Yes	Institutio	n name:	
		17.1. Checking Go Bar	nk	\$100.00

Official Form 106A/B

Schedule A/B: Property

page 3

Best Case Bankruptcy

De	ebtor 1	Angela Michele Biddix	Case number (if known)	3/21/10 0.33AW
18.		, mutual funds, or publicly traded stocks oles: Bond funds, investment accounts with broke	erage firms, money market accounts	
	■ No		nago ilino, mono, mamor account	
		Institution or issuer nar	me:	
19.	Non-pu		ated and unincorporated businesses, including an interest in	n an LLC, partnership, and
	■ No			
	☐ Yes.	Give specific information about them	% of ownership:	
20.	Negoti	nment and corporate bonds and other negotia lable instruments include personal checks, cashie egotiable instruments are those you cannot trans	ers' checks, promissory notes, and money orders.	
	■ No			
	☐ Yes.	Give specific information about them Issuer name:		
21.	Examp	nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403	b(b), thrift savings accounts, or other pension or profit-sharing pla	ns
	■ No			
	☐ Yes.	List each account separately.  Type of account:	Institution name:	
22.	Your s		at you may continue service or use from a company blic utilities (electric, gas, water), telecommunications companies	s, or others
	■ No			
	☐ Yes.		Institution name or individual:	
23.	Annuit	ies (A contract for a periodic payment of money t	to you, either for life or for a number of years)	
	■ No			
	☐ Yes	Issuer name and description.		
24.		s in an education IRA, in an account in a qual C. §§ 530(b)(1), 529A(b), and 529(b)(1).	lified ABLE program, or under a qualified state tuition progra	am.
	■ No □ Yes	Institution name and description S	Separately file the records of any interests.11 U.S.C. § 521(c):	
			, , , , , , , , , , , , , , , , , , , ,	
25.	Trusts,	equitable or future interests in property (other	er than anything listed in line 1), and rights or powers exerci	sable for your benefit
	- 110	Give specific information about them		
		s, copyrights, trademarks, trade secrets, and	other intellectual property	
20.		oles: Internet domain names, websites, proceeds		
	_	Give specific information about them		
27.		es, franchises, and other general intangibles	ative association holdings, liquor licenses, professional licenses	
	■ No	–	5-, -q, <sub>F</sub>	
		Give specific information about them		
M	oney or	property owed to you?		Current value of the
				portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

Debtor	Angela Michele Biddix		Case number (if known)	3/21/10 0.33Ai
28. <b>Ta</b> x	x refunds owed to you No			
<b>■</b> Y	es. Give specific information about th	nem, including whether you already	filed the returns and the tax years	
		Anticipated 2017 Tax Refun	d Federal	\$1,000.00
Ex ■ N	•	ny, spousal support, child support, r	maintenance, divorce settlement, propert	y settlement
Ex ■ N	benefits; unpaid loans you n		, sick pay, vacation pay, workers' compe	ensation, Social Security
	erests in insurance policies camples: Health, disability, or life insu	rance; health savings account (HSA	s); credit, homeowner's, or renter's insura	ance
■ N	No Yes. Name the insurance company of Company		Beneficiary:	Surrender or refund value:
If y so ■ N	meone has died.		ance policy, or are currently entitled to red	ceive property because
Ex ■ N	aims against third parties, whether camples: Accidents, employment disp No Yes. Describe each claim			
<b>=</b> N	•	aims of every nature, including co	ounterclaims of the debtor and rights t	o set off claims
35. <b>An</b> ■ N	y financial assets you did not alrea	dy list		
	Yes. Give specific information			
	dd the dollar value of all of your en or Part 4. Write that number here		ntries for pages you have attached	\$1,100.00
Part 5:	Describe Any Business-Related Prope	erty You Own or Have an Interest In. Li	st any real estate in Part 1.	
■ No	you own or have any legal or equitable in o. Go to Part 6.	interest in any business-related prope	rty?	
Part 6:	Describe Any Farm- and Commercial I If you own or have an interest in farmland		Have an Interest In.	
46. <b>Do</b>	you own or have any legal or equi	table interest in any farm- or com	mercial fishing-related property?	

Official Form 106A/B Schedule A/B: Property

page 5

No. Go to Part 7.

\$173,593.00

Deb	otor 1	Angela Michele Biddix		Case number (if known)	
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
_	Examp	have other property of any kind you did not already list? ples: Season tickets, country club membership			
	■ No □ Yes. (	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$156,300.00
56.	Part 2	2: Total vehicles, line 5	\$8,638.00	•	
57.	Part 3	3: Total personal and household items, line 15	\$7,555.00		
58.	Part 4	: Total financial assets, line 36	\$1,100.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	3: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	': Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$17,293.00	Copy personal property total	\$17,293.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$173,593.00

				3/21/18 8:53AM
Fill in this info	rmation to identify you	r case:		
Debtor 1	Angela Michele	Biddix		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 106C			
Schedu	le C: The Pr	operty You C	Claim as Exempt	4/16
the property you	listed on Schedule A/B:	Property (Official Form 106	filing together, both are equally responsible 6A/B) as your source, list the property that you ditional Page as necessary. On the top of an	u claim as exempt. If more space is

case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

		<u> </u>						
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount portion you own		ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	2716 Hydes Ferry Rd Nashville, TN 37218 Davidson County	\$156,300.00		\$5,000.00	Tenn. Code Ann. § 26-2-301			
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	Living Room (\$600), Dining Room (\$100), Kitchen Appliances (\$100),	\$1,900.00		\$1,900.00	Tenn. Code Ann. § 26-2-103			
	Washer & Dryer (\$300), Misc Kitchenware (\$50), 3 Bedrooms (\$500), Misc Furnishings (\$100), Patio Furniture (\$150) Line from <i>Schedule A/B</i> : 6.1	,		100% of fair market value, up to any applicable statutory limit				
	3 TVs (\$400), Laptop (\$50), Printer (\$50), Shredders (\$25), Cell Phone	\$655.00		\$655.00	Tenn. Code Ann. § 26-2-103			
	(\$100), 3 DVD Players (\$30) Line from <i>Schedule A/B</i> : <b>7.1</b>			100% of fair market value, up to any applicable statutory limit				
	2 Fur Coats Line from Schedule A/B: 8.1	\$2,000.00		\$2,000.00	Tenn. Code Ann. § 26-2-103			
	LINE HOTH SCHEUUIE AVD. U.1			100% of fair market value, up to any applicable statutory limit				

Part 1: Identify the Property You Claim as Exempt

De	btor 1	Angela Michele Biddix			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	, ,		Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		hing, Shoes, Jackets, essories	\$2,000.00		\$2,000.00	Tenn. Code Ann. § 26-2-104
	Line from Schedule A/B: 11.1			☐ 100% of fair market value, up to any applicable statutory limit		
		: Jewelry, Misc Costume Jewelry	\$1,000.00		\$1,000.00	Tenn. Code Ann. § 26-2-103
	Line from Scnedule AVB: 12.1				100% of fair market value, up to any applicable statutory limit	
		cking: Go Bank	\$100.00		\$100.00	Tenn. Code Ann. § 26-2-103
	Line from Schedule A/B: 17.1				100% of fair market value, up to any applicable statutory limit	
		eral: Anticipated 2017 Tax Refund	\$1,000.00		\$1,000.00	Tenn. Code Ann. § 26-2-103
	LINE	ioni Schedule A/B. 25.1			100% of fair market value, up to any applicable statutory limit	
3.	<ol> <li>Are you claiming a homestead exemption of more than \$160,375?</li> <li>(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)</li> </ol>					
		No				
		Yes. Did you acquire the property covere	d by the exemption wi	thin 1	215 days before you filed this case?	•
		□ No				
		☐ Yes				

					3/21/10 0.33AN
Fill in this info	rmation to identify you	ır case:			
Debtor 1	Angela Michele	Biddix			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
(Spouse II, IIIIIIg)	i iist ivaille	Wildlife Name Last Name			
United States E	Bankruptcy Court for the:	MIDDLE DISTRICT OF TENNESSEE			
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
O#: -: -! E	400D				
Official For					
Schedule	D: Creditors	Who Have Claims Secure	ed by Property	У	12/15
Be as complete a	ind accurate as possible.	If two married people are filing together, both are	equally responsible for su	pplying correct informa	tion. If more space
	he Additional Page, fill it	out, number the entries, and attach it to this form.			
•	rs have claims secured by	v vour property?			
	•	his form to the court with your other schedules.	Vou have nothing also to	roport on this form	
_		,	Tou have nothing else to	o report on this form.	
	in all of the information	below.			
Part 1: List	All Secured Claims		Column A	Column B	Column C
		more than one secured claim, list the creditor separates a particular claim, list the other creditors in Part 2. As	ely	Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Ditoch E	inancial	Describe the property that secures the claim:	value of collateral.	claim \$156 300 00	If any
2.1 Ditech F Creditor's Na		Describe the property that secures the claim:  2716 Hydes Ferry Rd Nashville, TN	<u>\$117,276.22</u>	\$156,300.00	\$0.00
Attn: Ad	ent, Officer or	37218 Davidson County			
Manage					
P.O. Box		As of the date you file, the claim is: Check all that apply.			
Rapid C	ity, SD 57709	☐ Contingent			
Number, Stre	eet, City, State & Zip Code	Unliquidated			
Who owes the	debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	debt? Check one.	☐ An agreement you made (such as mortgage or s	nagurad		
■ Debtor 1 only		car loan)	secured		
☐ Debtor 2 only ☐ Debtor 1 and	Dobtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	f the debtors and another	☐ Judgment lien from a lawsuit			
_	claim relates to a	Other (including a right to offset)  Mortgage	9		
community	debt				
Date debt was in	ncurred	Last 4 digits of account number			
2.2 Titlemax	ς - Bankruptcy		<b>.</b>		
Notices		Describe the property that secures the claim:	\$3,754.15	\$8,638.00	\$0.00
Creditor's Na	ime	2008 Ford Edge Limited 121,000			
	ficer Manager or	miles Debtor drives this vehicle.			
Agent	Ctt #200	As of the date you file, the claim is: Check all that			
	Street #200 ah, GA 31401	apply.			
	eet, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
rumber, out	oci, ony, otato a zip oodo	☐ Disputed			
Who owes the	debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or s	secured		
Debtor 2 only		car loan)			
Debtor 1 and		☐ Statutory lien (such as tax lien, mechanic's lien)			
	f the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this community	claim relates to a debt	Other (including a right to offset)	chase Money Securit	у	
Date debt was in	08/2017	Last 4 digits of account number			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debto	1 Angela Michele Biddix			Case number (if know)		
	First Name	Middle Name	Last Name			
Add 1	the dollar value of ye	our entries in Column A on	this page. Write that number h	ere: \$121,030.37		
	s is the last page of that number here:	your form, add the dollar v	alue totals from all pages.	\$121,030.37		
Part 2	List Others to	Be Notified for a Debt T	hat You Already Listed			
trying t	to collect from you f ne creditor for any o	or a debt you owe to some	one else, list the creditor in Pa	It that you already listed in Part 1. For example, if a collection agency is rt 1, and then list the collection agency here. Similarly, if you have more ditors here. If you do not have additional persons to be notified for any	е	
	<b>Bonial &amp; Assoc</b>	inager or Agent		On which line in Part 1 did you enter the creditor?		
	Titlemax of Nas	inager or Agent Pike		On which line in Part 1 did you enter the creditor?		
	Wilson & Assoc	inager or Agent Ste D220		On which line in Part 1 did you enter the creditor?		

Debtor 1 Angel Michele Biddix   Middle Name   Last Nam					3/21/18	8:53AM
Prist Name	Fill in t	his information to identify your	case:			
Prist Name	Debtor	1 Angela Michele B	iddiy			
United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE  Case number (if thrown)    Check if this is an amended filling  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106AB) and on any executory contracts on unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106AB) and on the contract on the contract on Schedule AB: Property (Inficial Form 106AB) and on the contract on Schedule AB: Property (Inficial Form 106AB) and on the contract on Schedule AB: Property (Inficial Form 106AB) and on the contract on Schedule AB: Property (Inficial Form 106AB) and on the contract on Schedule AB: Property (Inficial Form 106AB) and on the contract on Schedule AB: Property (Inficial Form 106AB) and on the contract on Schedule AB: Property (Inficial Form 106AB) and on the contract on Schedule AB: Property (Inficial Form 106AB) and on the continuation Page of any additional pages, write your name and case number (If known).  Part 12: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have nonpriority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.   Y	Debioi	7		Last Name	_	
United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE  Case number (if known)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list securety contracts on Schedule A/B: Property (Official Form 106E) by not not schedule Creditors With PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts on Schedule A/B: Property (Inficial Form 106E) by not not schedule Creditors With Parc Claims Secured by Property; I more space is needed, copy the Party on each (fill it out, need, fill it out, need that the cover need that the cover on the fill sea, and case number (if known).  List all of Your PRIORITY Unsecured Claims  Do any creditors have nonpriority unsecured claims against you?  List all of Your NONPRIORITY Unsecured Claims  Do any creditors have nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim, for each claim, list the creditor separately for each claim, for each claim is for a case of the creditor separatel					_	
Case number (# koown)   Check if this is an amended filing    Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims   12/15  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AR. Property (Official Form 166A/B) and on Schedule D: Creditors Who have claims Secured by Property, If more space is needed, copy the Part you need, fill to unber de the the lett. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.	(Spouse if	f, filing) First Name	Middle Name	Last Name		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  Base complete and accurate as possible. Use Part 1 for creditors with PRINRITY claims and Part 2 for creditors with NONPRIDITY claims. List the other pury to your own control countracts or unseprined leases that could result in a claim. Also list accuraty on shedule A/B: Property (Official Form 1696/B) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 1696/B) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 1696/B). Do not include any creditors with part claims Secured claims Schedule D: Creditors Who Have claims Secured by Property, If more space is needed, copy the Part you need, fill number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).  Part 13: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.	United 9	States Bankruptcy Court for the:	MIDDLE DISTRICT	OF TENNESSEE	_	
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims  Base complete and accurate as possible. Use Part 1 for creditors with PRINRITY claims and Part 2 for creditors with NONPRIDITY claims. List the other pury to your own control countracts or unseprined leases that could result in a claim. Also list accuraty on shedule A/B: Property (Official Form 1696/B) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 1696/B) and on Schedule C: Executory Contracts and Unexpired Leases (Official Form 1696/B). Do not include any creditors with part claims Secured claims Schedule D: Creditors Who Have claims Secured by Property, If more space is needed, copy the Part you need, fill number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).  Part 13: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.	Case ni	ımher				
Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to year vaceutory contracts or unseprined leases that could result in a claim. Also list essentatory contracts on Schedule AB: Property (Official Form 16x86) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 16x66). Do not include any creditors with partially secured claims state and interpret to the security of the party on end, fill in tumber the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2. Yes.  Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.  Yes.  4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  **Ad Astra Recovery Services**  Nopriority Creditor's Name**  Attraction of the debtor 2 only					☐ Check if this is an	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to may executory contracts or unsprinted leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule 0: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. 9 on part 2.  Yes.  Part 2: List All of Your NONPRIORITY Unsecured Claims  2. Do any creditors have nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, is the creditor sparately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor has a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  Ad Astra Recovery Services  Norphority Creditor's Name  Attraction of the debtro and another   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this cl					amended filing	
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to may executory contracts or unsprinted leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule 0: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. 9 on part 2.  Yes.  Part 2: List All of Your NONPRIORITY Unsecured Claims  2. Do any creditors have nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, is the creditor sparately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor has a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  Ad Astra Recovery Services  Norphority Creditor's Name  Attraction of the debtro and another   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this claim is for a community debt   Check if this cl	Officia	ol Form 106F/F				
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any accuratory contracts or unspired leases that could result in a claim. Also list a securing contracts on Schedule AB: Properly Official Form 168(P) and on Schedule O: Executions Contract and lineapired Losses (Official Form 169(C)). Do not include any creditors with partially sexperty Official Form 168(P) and on Schedule D: Creditions Who have claims Secured by Property. If more space is needed, copy the Part you need the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not flie that Part. On the top of any additional pages, write your name and case number (if known).  Part 1: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. Go to Part 2.  Yes.  List All of Your NoNPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured daim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.  Ad Astra Recovery Services  Nonpriority Creditors Name  Attn: Officer Manager or Agent 3611 N Ridge Road #104  Wichita, KS 67205-1214  Number Street City State Zip Code  Who incurred the debtor 2 only  Debtor 1 only  Debtor 1 only  Debtor 2 only  As of the date you file, the claim is: Check all that apply  When was the debt incurred?  Student loans  Colliquiated  Disported Priority Unsecured claim: Student loans  Disported Priority Unsecured claim: Student loans  Disported Priority Unsecured claim: Student loans  O C			lha Hayra Haar	armad Claima	40/45	
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases (Pricial Form 106A/B) and on Schedule 67. Executory Contracts and Unexpired Leases (Official Form 106A/D) and on Schedule 97. Executory Contracts and Unexpired Leases (Official Form 106A/D) and produced any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).    Fart 1: List All of Your PRIORITY Unsecured Claims						
No. Go to Part 2.	Schedule left. Attac name and	D: Creditors Who Have Claims Sec th the Continuation Page to this pag d case number (if known).	ured by Property. If more. If you have no inforn	e space is needed, copy the Part you need, fill	it out, number the entries in the boxes or	
No. Go to Part 2.    Yes.						
Yes.	_		u ciaiiiis agairist you?			
Section   Sect	_ `					
3. Do any creditors have nonpriority unsecured claims against you?    No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.			V Unacquied Claima			
No. You have nothing to report in this part. Submit this form to the court with your other schedules.   Yes.   Yes.						
List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    Total claim	_					
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    Ad Astra Recovery Services   Last 4 digits of account number   \$1,388.29	Ц١	No. You have nothing to report in this p	art. Submit this form to th	e court with your other schedules.		
unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.    Ad Astra Recovery Services	<b>I</b>	es.				
Ad Astra Recovery Services Nonpriority Creditor's Name Attn: Officer Manager or Agent 3611 N Ridge Road #104 Wichita, KS 67205-1214 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 anly At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No  As 4 digits of account number  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Contingent Disputed  Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts	unse than	ecured claim, list the creditor separately one creditor holds a particular claim, I	y for each claim. For each	claim listed, identify what type of claim it is. Do no	t list claims already included in Part 1. If mo	
Nonpriority Creditor's Name Attn: Officer Manager or Agent 3611 N Ridge Road #104 Wichita, KS 67205-1214  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No  No  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 nonpriority claims Debtor 6 nonpriority claims					Total claim	
Attn: Officer Manager or Agent 3611 N Ridge Road #104 Wichita, KS 67205-1214  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply			Last 4 d	igits of account number	\$1,38	8.29
3611 N Ridge Road #104 Wichita, KS 67205-1214 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			ont When w	as the debt incurred?		
Wichita, KS 67205-1214  Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply			elit Mileli M	as the dept incurred:		
Who incurred the debt? Check one.  □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Wichita, KS 67205-1214				
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		, ,	As of th	e date you file, the claim is: Check all that apply		
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Student loans □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			_			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts				- <del>-</del>		
☐ At least one of the debtors and another       Type of NONPRIORITY unsecured claim:         ☐ Check if this claim is for a community debt       ☐ Student loans         ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims         ☐ No       ☐ Debts to pension or profit-sharing plans, and other similar debts		_ ′	☐ Unlic	uidated		
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			_ '.			
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts			П			
Is the claim subject to offset?  report as priority claims  □ Debts to pension or profit-sharing plans, and other similar debts			numity			
■ No □ Debts to pension or profit-sharing plans, and other similar debts					orce that you did not	
		_		' '	ar debts	
			■ Othe	r Specify Re: Speedy Cash		

Debtor	Angela Michele Biddix	Case number (if know)	
4.2	AdvancedHealth	Last 4 digits of account number	\$335.28
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 249 Goodlettsville, TN 37070	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Banfield The Pet Hospital	Last 4 digits of account number	\$294.51
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 13998 Portland, OR 97213	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.4	Business Revenue Systems Inc	Last 4 digits of account number	\$105.28
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 13077	When was the debt incurred?	
	Des Moines, IA 50310-0077  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
		· · · · · · · · · · · · · · · · · · ·	
	☐ Yes	■ Other. Specify Re: Metro Center Health Group	

Debtor 1 Angela Michele Biddix		Case number (if know)			
4.5	Cavalry SPV I LLC	Last 4 digits of account number	\$13,986.56		
	Nonpriority Creditor's Name Attn: Officer Manager or Agent 500 Summit Lake Dr #400 Valhalla, NY 10595	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Re: Ford Credit Deficiency			
4.6	Check Into Cash	Last 4 digits of account number	\$500.00		
	Nonpriority Creditor's Name Attn: Officer Manager or Agent 3954 Clarksville Hwy Nashville, TN 37218	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□Yes	Other. Specify			
		— опет. ореону			
4.7	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	\$294.70		
	Attn: Officer 701 East 60th Street North	When was the debt incurred?			
	Sioux Falls, SD 57117				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	Поль			
	Debtor 2 only	☐ Contingent			
	Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□Yes	Other. Specify			

Best Case Bankruptcy

Debto	or 1 Angela Michele Biddix	Case number (if know)	
4.8	Credit Central Services	Last 4 digits of account number	\$191.81
	Nonpriority Creditor's Name Attn: Officer Manager or Agent 9550 Regency Square Blvd Ste 500 Jacksonville, FL 32225	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Re: Evine	
4.9	Credit Collection Services	Last 4 digits of account number	\$144.08
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 9134	When was the debt incurred?	
	Needham Heights, MA 02494-9134  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Re: Quest Diagnostics	
4.1			
0	DirecTV	Last 4 digits of account number	\$808.90
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 6550	When was the debt incurred?	
	Greenwood Village, CO 80155-6550  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	_	
	<b>—</b> 169	Other. Specify	

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Debto	n 1 Angela Michele Biddix	Case number (if know)	
4.1	First Tennessee Bank/Bankruptcy Dept	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name Attn: Officer 6522 Chapman Hwy Knoxville, TN 37920	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.1	H&R Emerald	Last 4 digits of account number	\$1,068.00
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 105374 Atlanta, GA 30348	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	HSN	Last 4 digits of account number	\$37.44
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 9090	When was the debt incurred?	
	Clearwater, FL 33758-9090  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify

)ebt	or 1 Angela Michele Biddix	Case number (if know)	
.1	Isaac Spine Joint & Pain Institute	Last 4 digits of account number	\$70.00
	Nonpriority Creditor's Name Attn: Officer Manager or Agent 2001 Charlotte Pike Nashville, TN 37203	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1	Jewelry Television	Last 4 digits of account number	\$840.04
	Nonpriority Creditor's Name		
	Attn: Officer Manager or Agent 9600 Parkside Drive	When was the debt incurred?	
	Knoxville, TN 37922  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify	
	Midland Funding LLC  Nonpriority Creditor's Name	Last 4 digits of account number	\$882.51
	Attn: Officer Manager or Agent 8875 Aero Drive #200	When was the debt incurred?	
	San Diego, CA 92123  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Re: Credit One Bank	

ebtor 1 Angela	Michele Biddix	Case number (if know)				
1						
Wildnight \		Last 4 digits of account number	\$227.00			
	reditor's Name cer Manager or Agent	When was the debt incurred?				
1112 7th A	•					
Monroe, V	VI 53566-1364					
	et City State ZIp Code	As of the date you file, the claim is: Check all that apply				
Who incurred	d the debt? Check one.					
Debtor 1 c	only	☐ Contingent				
Debtor 2 o	only	☐ Unliquidated				
Debtor 1 a	and Debtor 2 only	☐ Disputed				
☐ At least or	ne of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if t	this claim is for a community	☐ Student loans				
debt	-	$\square$ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim s	subject to offset?	report as priority claims				
■ No		☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes		Other. Specify				
Nationwid	le Credit Inc	Last 4 digits of account number	\$88.02			
	reditor's Name		<del></del>			
Attn: Offic	er Manager or Agent	When was the debt incurred?				
PO Box 26						
	alley, PA 18002-6314 et City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	d the debt? Check one.	As of the date you me, the claim is. Oneck all that apply				
Debtor 1 c		Пол				
	•	☐ Contingent				
Debtor 2 o	•	☐ Unliquidated				
	and Debtor 2 only	☐ Disputed				
	ne of the debtors and another	Type of NONPRIORITY unsecured claim:				
	this claim is for a community	☐ Student loans				
debt	subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	subject to onset:	☐ Debts to pension or profit-sharing plans, and other similar debts				
■ No □ Yes		■ Other. Specify Re: QVC				
		— Other opening				
Northland	Group reditor's Name	Last 4 digits of account number	\$294.70			
	er Manager or Agent	When was the debt incurred?				
PO Box 12						
	, NJ 08086-0129	_				
	et City State ZIp Code	As of the date you file, the claim is: Check all that apply				
_	d the debt? Check one.	_				
Debtor 1 c	•	Contingent				
Debtor 2 c	only	☐ Unliquidated				
Debtor 1 a	and Debtor 2 only	☐ Disputed				
☐ At least or	ne of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if t	this claim is for a community	☐ Student loans				
debt		☐ Obligations arising out of a separation agreement or divorce that you did not				
	subject to offset?	report as priority claims				
■ No		☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes		■ Other. Specify Re: Macy's				

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Debto	Angela Michele Biddix	Case number (if know)	
4.2	Portfolio Recovery Assoc LLC	Last 4 digits of account number	\$428.31
	Nonpriority Creditor's Name Attn Officer Manager or Agent PO Box 12914	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dain is. Check an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Re: Capital One Bank	
4.2			
1	Quest Diagnostics	Last 4 digits of account number	\$73.45
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 740777	When was the debt incurred?	
	Cincinnati, OH 45274-0777		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Santander Consumer Bankruptcy		<b>#</b> \$ 055 00
2	Dept	Last 4 digits of account number	\$6,965.99
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 560284	When was the debt incurred?	
	Dallas, TX 75356-0284		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	

■ No
□ Yes

report as priority claims

Is the claim subject to offset?

 $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

1 Angela Michele Biddix	Case number (if know)				
Continuet Book		¢540.7			
Suntrust Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$542.7			
Attn: Officer	When was the debt incurred?				
PO Box 85092 Richmond, VA 23286	_				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify				
Suntrust Bank	Last 4 digits of account number	\$139.7			
Nonpriority Creditor's Name		<b>V</b> 10011			
Attn: Officer	When was the debt incurred?				
PO Box 85092					
Richmond, VA 23286  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	The extense state year may also statem to consolidary and capping				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify				
Taylor Law PLLC	Last 4 digits of account number 3076	\$2,470.0			
Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 436709	When was the debt incurred?				
Louisville, KY 40253-6709					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Re: CACH, LLC/Springleaf				

Debioi	Angela Michele Blodix	Case number (if know)
4.2	Transworld Systems Inc	Last 4 digits of account number \$412.00
	Nonpriority Creditor's Name Attn: Officer Manager or Agent PO Box 15609	When was the debt incurred?
	Wilmington, DE 19850	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply
	Who incurred the debt? Check one.	,
	Debtor 1 only	☐ Contingent
	☐ Debtor 2 only	☐ Unliquidated
	☐ Debtor 1 and Debtor 2 only	☐ Disputed
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
	☐ Check if this claim is for a community	☐ Student loans
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not
	Is the claim subject to offset?	report as priority claims
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts
	Yes	■ Other. Specify Re: Nashville Surgery Center
4.2	West Asset Management	
7	West Asset Management  Nonpriority Creditor's Name	Last 4 digits of account number \$0.00
	Attn: Officer Manager or Agent 2703 N Highway 75 Sherman, TX 75090	When was the debt incurred?
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply
	■ Debtor 1 only	☐ Contingent
	Debtor 2 only	☐ Unliquidated
	☐ Debtor 1 and Debtor 2 only	☐ Disputed
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
	☐ Check if this claim is for a community	☐ Student loans
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts
	Yes	Other. Specify Re: Centennial Medical Center
is tryi have	nis page only if you have others to be notified ing to collect from you for a debt you owe to s	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
	ciated Credit Services INC	Line <b>4.23</b> of ( <i>Check one</i> ):
	Officer Manager or Agent	Part 2: Creditors with Nonpriority Unsecured Claims
	Box 5171	
westi	oorough, MA 01581	Last 4 digits of account number
Nome	and Address	On which patry in Port 4 or Port 2 did you list the original graditor?
	ciated Credit Services INC	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.24 of (Check one):
Attn:	Officer Manager or Agent	Part 2: Creditors with Nonpriority Unsecured Claims
	Box 5171	— Full 2. Ordanois with Horipholity discoured dialins
West	oorough, MA 01581	Last 4 digits of account number
NI=	and Andreas	
	nd Address son Co General Sessions Ct	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.25 of (Check one):
	Officer Manager or Agent	Part 2: Creditors with Nonpriority Unsecured Claims
PO Bo	ox 196302	- Fait 2. Greditors with Nonphority Orisecured Cidinis
Nash	ville, TN 37219-6302	Last 4 digits of account number

Schedule E/F: Creditors Who Have Unsecured Claims

Page 10 of 11

Debtor 1 Angela Michele Biddix	Case number (if know)		
Name and Address Enhanced Recovery Company LLC Attn: Officer Manager or Agent PO Box 57610	<del></del>	ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Jacksonville, FL 32241	Last 4 digits of account number		
Name and Address Evine Attn: Officer Manager or Agent 9550 Regency Square Blvd Ste 500 Jacksonville, FL 32225	<del></del>	ou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Fenton & McGarvey Attn: Officer Manager or Agent 2401 Stanley Gualt Pkwy Louisville, KY 40223		ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address IC System Inc Attn: Officer Manager or Agent PO Box 64886 Saint Paul, MN 55164-0886	On which entry in Part 1 or Part 2 did you Line 4.3 of (Check one):	ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims  ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Penn Credit Corp Attn: Officer Manager or Agent PO Box 988 Harrisburg, PA 17108-0988		ou list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 33,589.35
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 33,589.35

Fill in this information to identify your case:						
Debtor 1	Angela Michele B	iddix				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE			
Case number _				☐ Check if this is an amended filing		

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for Name, Number, Street, City, State and ZIP Code **Roosevelt Law Center** Reject Attn: Officer Manager or Agent **Legal Assistance Contract** 1120 Sycamore Ave Ste 2F Vista, CA 92081

Doc 1

Fill in thi	s information to identify you	r case:			
Debtor 1	Angela Michele	Riddix			
Dobto. 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ing) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE		
Case nun	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
		1.14			
Sche	dule H: Your Cod	debtors			12/15
	s thin the last 8 years, have yo		roperty state or territo	ry? (Community property	r states and territories include
■ No □ Ye	. Go to line 3. s. Did your spouse, former spo	otors. Do not include your	e with you at the time?	r if your spouse is filing	g with you. List the person shown
■ No □ Ye  3. In Co in lin Form	o. Go to line 3.  s. Did your spouse, former spouse.  Slumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official	ouse, or legal equivalent live otors. Do not include your if that person is a guaran	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed th	
■ No □ Ye  3. In Co in lin Form	o. Go to line 3.  s. Did your spouse, former spouse	ouse, or legal equivalent live otors. Do not include your if that person is a guaran	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed th 06G). Use Schedule D, S	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
■ No □ Ye  3. In Co in lin Form	o. Go to line 3.  s. Did your spouse, former spouse.  Slumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed th 06G). Use Schedule D, S	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt
3. In Coin lin Form out C	o. Go to line 3.  s. Did your spouse, former spoulumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  Column 1: Your codebtor	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed the office of the office	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
■ No □ Ye  3. In Co in lin Form	o. Go to line 3.  s. Did your spouse, former spoulumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  Column 1: Your codebtor	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed the D6G). Use Schedule D, Schedule D, Schedule D, Schedule D, line	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	J. Go to line 3.  S. Did your spouse, former 1, list all of your codebte e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor Name, Number, Street, City, State and 1.	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed the office of the office	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	o. Go to line 3.  s. Did your spouse, former 1, list all of your codebte e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and State Street, City, State State Street, City, State State Street, City, State	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed the D6G). Use Schedule D, Schedule D, Schedule D, Schedule D, line	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	J. Go to line 3.  S. Did your spouse, former 1, list all of your codebte e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor Name, Number, Street, City, State and 1.	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? r spouse as a codebto ntor or cosigner. Make	r if your spouse is filing sure you have listed the office of the office	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	a. Go to line 3.  s. Did your spouse, former 1, list all of your codebte e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor** Name  Name  Number Street	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  r spouse as a codebto ntor or cosigner. Make lule G (Official Form 1	r if your spouse is filing sure you have listed the office of the office	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	a. Go to line 3.  s. Did your spouse, former 1, list all of your codebte e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor** Name  Name  Number Street	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  r spouse as a codebto ntor or cosigner. Make lule G (Official Form 1	r if your spouse is filing sure you have listed the D6G). Use Schedule D, S  Column 2: The cre Check all schedule  Schedule D, line Schedule E/F, line Schedule G, line	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	a. Go to line 3.  s. Did your spouse, former 1, list all of your codebte e 2 again as a codebtor only 106D), Schedule E/F (Official column 2.  **Column 1: Your codebtor** Name  Name  Number Street	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  r spouse as a codebto ntor or cosigner. Make lule G (Official Form 1	r if your spouse is filing sure you have listed the D6G). Use Schedule D, Schedule D, Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Sch	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	a. Go to line 3.  s. Did your spouse, former spouse	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  r spouse as a codebto ntor or cosigner. Make lule G (Official Form 1	r if your spouse is filing sure you have listed the D6G). Use Schedule D, S  Column 2: The cre Check all schedule  Schedule D, line Schedule E/F, line Schedule G, line	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:
3. In Coin lin Form out C	a. Go to line 3.  s. Did your spouse, former spouse	ouse, or legal equivalent live otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  r spouse as a codebto ntor or cosigner. Make lule G (Official Form 1	r if your spouse is filing sure you have listed the D6G). Use Schedule D, Schedule D, Schedule D, line Schedule G, line Schedule D, line Sched	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt s that apply:

Schedule H: Your Codebtors

	in this information to identify your countries.  Angela Mich								
	otor 2  puse, if filing)								
Uni	ited States Bankruptcy Court for the	: MIDDLE DISTRICT C	F TENNESSEE						
	se number nown)		-			☐ A supp	ended filing lement show	ing postpetition following date:	
0	fficial Form 106I					MM / D	DD/ YYYY	-	
S	chedule I: Your Inc	ome				, 2	2,		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t 1: Describe Employment	r spouse is not filing w	ith you, do not inclu	de infori	mati	on about your d case numbe	spouse. If n r (if known).	nore space is Answer every	needed,
	information.		Debtor 1					filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				mployed lot employed		
	employers.	Occupation	uber Driver						
	Include part-time, seasonal, or self-employed work.	Employer's name	self employed						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here? Since J	uly, 20	17				
Pai	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any	line, write \$0 ir	the space. In	nclude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	empl	oyers for that p	erson on the	lines below. If	you need
						For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.	00 \$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.	<u>00</u> +\$ _	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

2,309.62

Combined monthly income

12.

13. <b>Do yo</b>	you expect an inci No.	ease or decrease within the year after you file this form?	monthly meetine
•	Yes. Explain:	Debtor anticipates having a roommate beginning April, 2018.	

applies

1

In re	Angela Michele Biddix	Case No.	

Debtor(s)

## SCHEDULE I - YOUR INCOME Attachment A

Debtor's monthly business expenses are as follows:

Gas: \$350.00

Oil Changes: \$10.00

Maintenance: \$60.00

Total: \$420.00

====	in this informat	tion to identify w	211, 22221										
		tion to identify yo	our case.										
Debtor 1 Angela Michele Biddix				ix			Check if this is:						
Debtor 2							☐ An amended filing ☐ A supplement showing postpetition chapter						
(Spo	ouse, if filing)							1:	3 expenses as of	the following date:			
Unit	United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE								MM / DD / YYYY				
Cas	e number												
(If kı	nown)												
Of	fficial Fo	rm 106J											
S	chedule	J: Your	Exper	nses							12/15		
Be info	as complete a	and accurate as	s possible eded, atta	. If two married peo									
Par 1.		ibe Your House	ehold										
١.	Is this a joint case?  No. Go to line 2.												
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?												
	□ No												
			st file Offici	al Form 106J-2, Exp	enses f	or Separate House	hold of D	ebto	r 2.				
2.	Do vou have	e dependents?	■ No										
	Do not list De Debtor 2.	•	☐ Yes.	Fill out this informatio each dependent		Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?			
	Do not state	the								□ No	ı		
	dependents i	names.								☐ Yes			
										□ No			
										☐ Yes ☐ No			
										☐ Yes			
										□ No			
										☐ Yes			
3.	expenses of	enses include f people other t d your depende	han <sub>—</sub>	No Yes									
		ate Your Ongoi											
exp				uptcy filing date un y is filed. If this is a									
				government assista									
	ficial Form 10		a navo m	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ur moome		_	Your expe	enses			
4.	The rental or home ownership expenses for your residence. Include first mortgapayments and any rent for the ground or lot.						e 4.	\$		0.00			
	If not includ	led in line 4:											
	4a. Real e	estate taxes					4a.	\$		0.00			
		rty, homeowner's	s, or renter	's insurance			4b.			0.00			
				pkeep expenses			4c.			0.00			
_		owner's associa			00 h	o oguite la arra	4d.			0.00			
5.	Additional n	nortgage paym	ents for yo	our residence, such	as nom	e equity loans	5.	\$		0.00			

Debtor 1		Angela Michele Biddix				ber (if known)	
6.	Utiliti	ies:					
٥.	6a.		heat, natural gas		6a.	\$	200.00
	6b.	•	ver, garbage collection		6b.	\$	40.00
	6c.		, cell phone, Internet, satellite, an	nd cable services	6c.	\$	280.00
	6d.	Other. Spe			6d.	\$	0.00
7.	Food		ekeeping supplies		7.	\$	255.00
8.			hildren's education costs		8.	\$	0.00
9.	Cloth	ning, laund	y, and dry cleaning		9.	\$	12.00
			roducts and services		10.	\$	15.00
			ntal expenses		11.		100.00
			Include gas, maintenance, bus o	r train fare.		•	
			ar payments.		12.	\$	0.00
13.	Ente	rtainment,	clubs, recreation, newspapers,	magazines, and books	13.	\$	0.00
14.	Char	itable cont	ributions and religious donation	ns	14.	\$	0.00
15.	Insur	rance.	_				
			surance deducted from your pay	or included in lines 4 or 20.			
	15a.	Life insura	nce		15a.		0.00
	15b.	Health ins	urance		15b.	\$	0.00
	15c.	Vehicle ins	surance		15c.	\$	133.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your p	pay or included in lines 4 or 20.			
	Spec	•			16.	\$	0.00
17.			ease payments:			_	
			ents for Vehicle 1		17a.	·	0.00
			ents for Vehicle 2		17b.	·	0.00
		Other. Spe			17c.	·	0.00
		Other. Spe			17d.	\$	0.00
18.				support that you did not report as		\$	0.00
10			our pay on line 5, Schedule I, sou make to support others w	Your Income (Official Form 106I).	10.	\$	0.00
13.	Spec		you make to support others w	no do not nve with you.	19.	Ψ	0.00
20		·	arty expenses not included in li	ines 4 or 5 of this form or on Scho		ur Income	
20.			on other property		20a.		0.00
		Real estate			20b.		0.00
			nomeowner's, or renter's insuranc	ce.	20c.	·	0.00
			ce, repair, and upkeep expenses		20d.		0.00
			er's association or condominium		20e.		0.00
21		r: Specify:	Pet Supplies	4405	21.	•	12.00
۷۱.	Othe	a. Specify.	ret Supplies			<del>τ</del> φ	12.00
22.	Calc	ulate your r	nonthly expenses				
	22a.	Add lines 4	through 21.			\$	1,047.00
	22b.	Copy line 22	2 (monthly expenses for Debtor 2	), if any, from Official Form 106J-2		\$	
	22c. /	Add line 22a	a and 22b. The result is your mor	nthly expenses.		\$	1,047.00
0.0			ŕ	- ,			-,
23.		-	nonthly net income.			•	
			12 (your combined monthly incom	,	23a.	·	2,309.62
	23b.	Copy your	monthly expenses from line 22c	above.	23b.	-\$	1,047.00
	00-	Cb.4	ann an an the bank and a second second				
	23c.		our monthly expenses from your r	monthly income.	23c.	\$	1,262.62
		THE RESULL	is your monthly net income.		200.	<u>.                                    </u>	, -
24.	Do v	ou expect a	in increase or decrease in vour	expenses within the year after ye	ou file this	form?	
	For ex	xample, do yo	u expect to finish paying for your car le	oan within the year or do you expect you			e or decrease because of a
			erms of your mortgage?				
	■ No						
	□Y€	es.	Explain here:				

Fill in this infor	mation to identify your	case:				
Debtor 1	Angela Michele B					
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE			
Case number (if known)  Check if this is an amended filing						
Official For	m 106Dec					
Declara	tion About a	ın Individual	<b>Debtor's Schedules</b>		12/15	
If two married people are filing together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or						
obtaining mone		n connection with a bank	cruptcy case can result in fines up to \$250,0			
Sig	ın Below					

d you pay or agree to pay someone who is NC	Γ an attorney to help you fill out bankruptcy forms?						
No							
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)						
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
/s/ Angela Michele Biddix	X						
Angela Michele Biddix Signature of Debtor 1	Signature of Debtor 2						
t	No Yes. Name of person  der penalty of perjury, I declare that I have read they are true and correct.  /s/ Angela Michele Biddix  Angela Michele Biddix						

Date

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Date March 21, 2018

Best Case Bankruptcy

Fill	l in this inform	ation to identify you	r case:				
	btor 1	Angela Michele					
		First Name	Middle Name		Last Name		
_	btor 2 ouse if, filing)	First Name	Middle Name		Last Name		
Un	ited States Bar	kruptcy Court for the:	MIDDLE DISTRICT OF	TENNE	SSEE		
Ca	se number						
	nown)					_	heck if this is an mended filing
_	· · · · -	4.07					
	fficial For		Affaire for Indiv	idual	ls Eiling for B	ankruptov	414.6
			Affairs for Indiv				4/16
info	rmation. If me	ore space is needed,	attach a separate sheet			equally responsible for supp additional pages, write you	
		). Answer every ques					
Pa			rital Status and Where Y	ou Lived	d Before		
1.	What is your	current marital statu	is?				
	<ul><li>☐ Married</li><li>■ Not married</li></ul>	ied					
2.	During the la	st 3 years, have you	lived anywhere other that	ın where	you live now?		
	■ No						
	_	all of the places you I	ived in the last 3 years. Do	not inclu	ude where you live now	·.	
	Debtor 1 Pri	or Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> stat						ity property state or territory co, Texas, Washington and W	
	■ No						
	☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors	(Official F	Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income				
4.	Fill in the total	amount of income yo	nployment or from opera u received from all jobs an have income that you rece	d all busi	inesses, including part-		dar years?
	□ No						
		in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(be	oss income fore deductions and clusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips		\$2,979.42	☐ Wages, commissions, bonuses, tips	
			Operating a business			☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

					Debtor 1		Debtor 2		
		Sources of income Check all that apply.			ome oply.	Gross income (before deductions and exclusions)			
			dar year: December	31, 2017 )	☐ Wages, commissions, bonuses, tips	\$15,000.00	☐ Wages, comr bonuses, tips	missions,	
					Operating a business		☐ Operating a b	ousiness	
			dar year be December		■ Wages, commissions, bonuses, tips	\$11,000.00	☐ Wages, comr bonuses, tips	missions,	
					☐ Operating a business		☐ Operating a b	ousiness	
ة ١ ا	and winn	other plings. I each s	public bene If you are fil	fit payments; ing a joint cas the gross inco	er that income is taxable. Exa pensions; rental income; inter ie and you have income that y ome from each source separa	rest; dividends; money collect you received together, list it c	eted from lawsuits; ronly once under Del	oyalties; and btor 1.	
					Debtor 1		Debtor 2		
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
			dar year be December		Unemployment	\$2,600.00			
					Inheritance	\$32,000.00			
Dow	2-	<b>-</b> 1 : - 4	Cantain Da	V	Mada Dafana Van Filad fan	Dambara da			
Part					Made Before You Filed for	. ,			
_	Are	either No.	Neither D	ebtor 1 nor D	's debts primarily consumer bebtor 2 has primarily consu personal, family, or househo	<b>umer debts.</b> Consumer debt	s are defined in 11	U.S.C. § 10 <sup>7</sup>	1(8) as "incurred by an
			_		re you filed for bankruptcy, di	d you pay any creditor a tota	of \$6,425* or more	e?	
			□ <sub>No.</sub>	paid that cre	each creditor to whom you pai editor. Do not include paymer	nts for domestic support oblig			
			* Subject		payments to an attorney for the ton 4/01/19 and every 3 year		or after the date of	adjustment	
ı		Yes.			r both have primarily consure you filed for bankruptcy, di		al of \$600 or more?		
			■ No.	Go to line 7					
			☐ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
					, ,				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

No Yes

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Roosevelt Law Center Attn: Officer Manager or Agent 1120 Sycamore Ave Ste 2F Vista, CA 92081	Monetary monthly installments	Beginning 12/2017 - 03/2018	\$1,900.00

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

18.	<ul> <li>Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, oth transferred in the ordinary course of your business or financial affairs?</li> <li>Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on you include gifts and transfers that you have already listed on this statement.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>									
	Ad	rson Who Received Transfer dress		Description and property transfe		ķ	oayme	be any property or ents received or debts exchange		ate transfer was nade
	Per	rson's relationship to you								
19.		hin 10 years before you filed for bankrup eficiary? (These are often called asset-pro			ny property to a	self-	settled	d trust or similar device	of v	vhich you are a
		No Yes. Fill in the details.								
	_	me of trust		Description and	value of the pro	perty	transi	ferred		ate Transfer was
									n	nade
Par	t 8:	List of Certain Financial Accounts, Ins	strun	nents, Safe Depos	it Boxes, and St	orage	Units	3		
20.	solo	nin 1 year before you filed for bankruptc d, moved, or transferred? ude checking, savings, money market, c		•						
		ses, pension funds, cooperatives, asso					posit	, snares in banks, crear	ı uı	nons, brokerage
		No								
		Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)			ast 4 digits of Type of account count number instrument		unt or	nt or Date account was closed, sold, moved, or transferred			Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
		No								
		Yes. Fill in the details.								
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Desc	cribe t	he contents		Do you still have it?
22.	Hav	e you stored property in a storage unit o	or pla	nce other than you	ır home within 1	year	before	e you filed for bankrupt	cy?	
		No								
		Yes. Fill in the details.								
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Desc	cribe t	he contents		Do you still have it?
Par	t 9:	Identify Property You Hold or Control	for S	Someone Fise						
гаг	ι σ.	identify Property Tou Hold of Control	101 3	oomeone Lise						
23.		you hold or control any property that so someone.	meoı	ne else owns? Inc	lude any proper	ty you	u borr	owed from, are storing	for,	or hold in trust
		No Yes. Fill in the details.								
		rner's Name dress (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Desc	cribe t	he property		Value

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Par	t 10: Give Details About Environmental Information	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	aw, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	nental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Best Case Bankruptcy

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Doc 1

Best Case Bankruptcy

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### **United States Bankruptcy Court** Middle District of Tennessee

	Windule District of Telliesso	ee .	
In		Case No.	
	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorompensation paid to me within one year before the filing of the petition in bankruptcy be rendered on behalf of the debtor(s) in contemplation of or in connection with the base	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	4,250.00
	Prior to the filing of this statement I have received	\$	0.00
	Balance Due	\$	4,250.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other person	n unless they are mem	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspec	cts of the bankruptcy c	ase, including:
	a. [Other provisions as needed]  For the agreed upon fee, Rothschild & Ausbrooks, PLLC has agree be rendered in this Chapter 13/7 proceeding, which include but a before and during the pendency of the case concerning the nature preparation and filing of statements and schedules, attendance a hearing, preparation of defense in the event of a motion for relief amend the plan, add creditors, or suspend payments, and prepar services such as dealing with creditors during the life of the plan the trustee, and other regular and routine services not specificall charge to the debtor.	re not limited to adden and effect of Chat the meeting of creation stay, preparation and filing of castion and filing of castion and filing requestions.	ptice rendered to the debtor pter 13/7 bankruptcy, editors and confirmation tion of motions by debtor to lischarge documents. Other sts for payment reports from
6.	By agreement with the debtor(s), the above-disclosed fee does not include the followin  The debtor has acknowledged that matters may arise in connecti		otcv case which are not

included in the regular and routine services to be rendered for the fee quoted. Charges for such additional services will be assessed at our standard hourly rate for the particular attorney working on the case, and shall be in addition to the quoted fee. Debtor has been advised that these charges must be submitted to the Bankruptcy Court for approval. Such services would include, but are not limited to, attendance at depositions or Rule 2004 examinations and other pretrial hearings in regard to objections to confirmation and/or adversary proceedings concerning discharge of debt, research, preparation of briefs, preparation for trial, and court time at trial in such litigated matters.

In re	Angela Michele Biddix	Case No.	
	Dobtor(s)		

Debtor(s)

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

	CERTIFICATION				
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.					
March 21, 2018	/s/ Mary Beth Ausbrooks				
Date	Mary Beth Ausbrooks				
	Signature of Attorney				
	Rothschild & Ausbrooks PLLC				
	1222 16th Avenue South, Suite 12				
	Nashville, TN 37212-2926				
	(615) 242-3996 Fax: (615) 242-2003				
	notice@rothschildbklaw.com				
	Name of law firm				

### RIGHTS AND RESPONSIBILITIES OF CHAPTER 13 CLIENTS AND ATTORNEYS

It is important for clients who file a bankruptcy case under Chapter 13 to understand their rights and responsibilities. It is also important that the clients know what their attorney's responsibilities are, and understand the importance of communicating with their attorney to make the case successful. Clients should also know that they may expect certain services to be performed by their attorney. The below guidelines provided by the Court are hereby agreed to by the clients and their attorneys.

### CLIENT

The attorney and client acknowledge that they have discussed the obligation of the client to:

### Before the case is filed:

- Provide the attorney with complete and accurate financial information, including all 1. debts owed, all property owned, an accurate, current and projected budget, copies of all required tax returns or transcripts from the IRS, and 6 months of pay stubs.
- Inform the attorney of any prior bankruptcies and the outcome of those proceedings. 2.
- Discuss with the attorney the client's reasons and objectives for filing the case. 3.
- Review the complete bankruptcy petition (including all schedules and statements) upon 4. its receipt and promptly advise the attorney of any errors, omissions, or changes which need to be made.

### After the case is filed:

- 1. Pay the Trustee within 30 days of filing.
- Keep the trustee and attorney informed of the client's address, telephone number and 2. employment.
- Inform the attorney of any wage garnishment or attachment of assets which occurs or 3. continues after the case is filed.
- Review the Confirmation Order when received, and advise the attorney if the client has 4. questions about which creditors are being paid and how much or if the client has questions about anything the debtor must do.
- Review the Trustee's Notice of Intent to Pay Claims when received, and advise the 5. attorney of any filed claim that appears to be improper or excessive, or any creditor who has not filed a proof of claim but the client wants to make sure is paid.
- Insure all property of the estate, including maintaining liability, collision, and 6. comprehensive insurance on vehicles securing loans or leases.

Document

- Contact the attorney promptly if the client loses his/her job, becomes ill, experiences a 7. budget change, or is otherwise unable to make plan payments.
- Inform the attorney if any tax refunds the client is entitled to are seized or not returned to 8. the client by the IRS.

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Provide the documentation/information requested by attorney for the attorney to file 9. necessary post-petition motions (tax returns, pay stubs, amended budget). Case 3:18-bk-01941 Doc 1 Filed 03/21/18 Entered 03/21/18 08:58:38 Revised 2/27/18

- 10. Contact the attorney before buying, refinancing, or selling real property or a motor vehicle or before entering into any loan agreements to find out what approvals are required, including retaining a real estate agent or listing property for sale.
- 11. Contact the attorney if the debtor receives an inheritance.
- 12. Contact the attorney if the client is sued during the case.
- 13. Contact the attorney if the client has any potential lawsuits against another person or company after the bankruptcy is filed.
- 14. Attend a financial management workshop no later than the due date of the last scheduled plan payment.
- 15. Open and read all mail from the attorney, Trustee, or Bankruptcy Court.

### **ATTORNEY**

The attorney has agreed to accept a flat fee of \$4,250.00 for all aspects of the bankruptcy case except for services excluded from the flat fee (described below). For some of the excluded services, the attorney has agreed to limit the fees to amounts set by the Bankruptcy Court for the specific services. For the remaining excluded services, the attorney may request additional fees on an hourly basis in accordance with the agreement between the attorney and the client.

Fees shall be paid by the Trustee through the plan unless otherwise ordered. The attorney may not receive fees directly from the client other than the initial retainer, unless paid by a third party, in which event such payment must be fully disclosed to the Bankruptcy Court. Any fee must be agreed upon by the client and the attorney, and approved by the court.

Services included in the flat fee. The services the attorney agrees to provide for the flat fee include:

- 1. Meet with the client to review the client's debts, assets, liabilities, income, and expenses. Request appropriate financial information, including credit reports and information on any mortgage debt or support obligation.
- 2. Conduct necessary due diligence regarding any prior bankruptcies involving the client.
- 3. Counsel the client regarding the advisability of filing a bankruptcy and whether filing either a Chapter 7 or Chapter 13 case would assist in meeting the client's objectives; discuss procedures in both Chapter 7 and Chapter 13 with the client, and answer the client's questions.
- 4. Explain what payments will be made directly by the client and what payments will be made through the client's Chapter 13 plan.
- 5. Explain to the client how, when, and where to make the Chapter 13 plan payments, including advising the client that the first plan payment must be made to the Trustee no later than 30 days after the case is filed.
- 6. Explain to the client how the attorney's fees and trustee's fees are paid, providing a signed copy of the contract between the client and the attorney and a copy of this Rights and Responsibilities to the debtor.

7. Advise the client of the requirement to attend the 341 Meeting of Creditors, arriving early, and instruct the client as to the date, time, and place of the meeting. Advise the client to bring a copy of the petition and the schedules and statements to the Meeting.

8. Advise the client of the necessity of maintaining liability, collision, and comprehensive insurance on vehicles securing loans or leases and advise the client of the duty to insure all property of the estate.

9. Timely prepare and file the client's petition, plan, statements, and schedules.

10. Ensure that if the plan includes a motion to void liens, that the collateral is identified and an exemption is claimed.

11. Ensure proper notice and service of the plan.

- 12. Appear at the 341 Meeting of Creditors with the client.
- 13. Review all documents filed in the case and all communications concerning the case.
- 14. Respond to objections to plan confirmation and, where necessary, prepare an amended plan, and appear at the confirmation hearing.
- 15. Explain that a plan may be modified after confirmation and, where needed, prepare, file, and serve necessary modifications to the plan which may include suspending, lowering, or increasing plan payments.

16. Prepare, file, and serve necessary amended statements and schedules in accordance with information provided by the client.

17. Review the confirmation order and the Trustee's notice of intent to pay claims.

- 18. If necessary, object to improper or invalid claims based upon information provided by the client.
- 19. File claims for creditors when the client's goals and interests are served by such filing.
- 20. Respond to client communications, advising the client of the best and most efficient means of communications.

21. File notice of change of employment/change of address.

- 22. Represent the client in connection with all motions filed in the bankruptcy case, other than those listed in the excluded services below.
- 23. Where appropriate, prepare, file, and serve necessary motions to avoid liens on real or personal property.

Additional services requiring additional limited fees. The following services are not included in the flat fee, but the attorney has agreed to provide these services, when necessary and appropriate for the case, for additional compensation based on a fee schedule approved by the Court. The maximum additional fee for work performed in connection with obtaining the necessary Court approval for certain activities is indicated below:

- 1. Mortgage loan modification of the claim secured by the debtor's principal residence up to \$500
- 2. Substitution of collateral up to \$400.
- 3. Retention of a realtor, auctioneer or other professional relating to the sale of property or representing the interests of the estate up to \$200
- 4. Sale of property and disposition of the proceeds, resulting in the closing of such sale and the filmes of any page sary repert of the sale the feet 03/21/18 08:58:38 Desc Main Document Page 54 of 60

5. Retention of special counsel relating to collecting or pursuing a cause of action in a different judicial forum and that results in the filing of a motion and order authorizing the approval of a settlement of such litigation – up to \$300.

Additional services on an hourly basis. The following services are not included in the flat fee and are not covered by any specific cap on fee, but the attorney has agreed to provide these services, when necessary and appropriate for the case, but may charge an hourly rate for the work performed – subject to Court approval:

- 1. Motions for sanctions or contempt.
- 2. Representation at a Rule 2004 examination.

Services the attorney has not agreed to provide. The attorney has not agreed to represent the client in any adversary proceeding or certain contested matters placed on an "adversary track" by order of the Court, unless the details of such separate litigation representation are spelled out in an addendum to this agreement or in a separate supplemental contract. The client will be fully apprised of any such anticipated litigation that would not be covered by this agreement.

Effective Date: 3/20/18  Rothschild & Ausbrooks, PLLC	X Angla M. Biddix CLIENT
By:	CLIENT (if joint)

# **United States Bankruptcy Court**Middle District of Tennessee

In re	Angela Michele Biddix		Case No.					
		Debtor(s)	Chapter	13				
VERIFICATION OF CREDITOR MATRIX								
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.								
Date:	March 21, 2018	/s/ Angela Michele Biddix Angela Michele Biddix						
		Signature of Debtor						

ANGELA MICHELE BIDDIX 2716 HYDES FERRY RD NASHVILLE TN 37218

MARY BETH AUSBROOKS ROTHSCHILD & AUSBROOKS PLLC 1222 16TH AVENUE SOUTH, SUITE 12 NASHVILLE, TN 37212-2926

AD ASTRA RECOVERY SERVICES ATTN: OFFICER MANAGER OR AGENT 3611 N RIDGE ROAD #104 WICHITA KS 67205-1214

ADVANCEDHEALTH
ATTN: OFFICER MANAGER OR AGENT
PO BOX 249
GOODLETTSVILLE TN 37070

ASSOCIATED CREDIT SERVICES INC ATTN: OFFICER MANAGER OR AGENT P.O. BOX 5171 WESTBOROUGH MA 01581

BANFIELD THE PET HOSPITAL ATTN: OFFICER MANAGER OR AGENT PO BOX 13998 PORTLAND OR 97213

BONIAL & ASSOCIATES ATTN: OFFICER MANAGER OR AGENT PO BOX 9013 ADDISON TX 75001

BUSINESS REVENUE SYSTEMS INC ATTN: OFFICER MANAGER OR AGENT PO BOX 13077 DES MOINES IA 50310-0077

CAVALRY SPV I LLC ATTN: OFFICER MANAGER OR AGENT 500 SUMMIT LAKE DR #400 VALHALLA NY 10595

CHECK INTO CASH ATTN: OFFICER MANAGER OR AGENT 3954 CLARKSVILLE HWY NASHVILLE TN 37218

CITIBANK ATTN: OFFICER 701 EAST 60TH STREET NORTH SIOUX FALLS SD 57117 CREDIT CENTRAL SERVICES
ATTN: OFFICER MANAGER OR AGENT
9550 REGENCY SQUARE BLVD STE 500
JACKSONVILLE FL 32225

CREDIT COLLECTION SERVICES ATTN: OFFICER MANAGER OR AGENT PO BOX 9134 NEEDHAM HEIGHTS MA 02494-9134

DAVIDSON CO GENERAL SESSIONS CT ATTN: OFFICER MANAGER OR AGENT PO BOX 196302 NASHVILLE TN 37219-6302

DIRECTV
ATTN: OFFICER MANAGER OR AGENT
PO BOX 6550
GREENWOOD VILLAGE CO 80155-6550

DITECH FINANCIAL ATTN: AGENT, OFFICER OR MANAGER P.O. BOX 6154 RAPID CITY SD 57709

ENHANCED RECOVERY COMPANY LLC ATTN: OFFICER MANAGER OR AGENT PO BOX 57610

JACKSONVILLE FL 32241

EVINE

ATTN: OFFICER MANAGER OR AGENT 9550 REGENCY SQUARE BLVD STE 500 JACKSONVILLE FL 32225

FENTON & MCGARVEY ATTN: OFFICER MANAGER OR AGENT 2401 STANLEY GUALT PKWY LOUISVILLE KY 40223

FIRST TENNESSEE BANK/BANKRUPTCY DEPT ATTN: OFFICER 6522 CHAPMAN HWY KNOXVILLE TN 37920

H&R EMERALD ATTN: OFFICER MANAGER OR AGENT PO BOX 105374 ATLANTA GA 30348

HSN

ATTN: OFFICER MANAGER OR AGENT PO BOX 9090 CLEARWATER FL 33758-9090

IC SYSTEM INC ATTN: OFFICER MANAGER OR AGENT PO BOX 64886 SAINT PAUL MN 55164-0886

ISAAC SPINE JOINT & PAIN INSTITUTE ATTN: OFFICER MANAGER OR AGENT 2001 CHARLOTTE PIKE NASHVILLE TN 37203

JEWELRY TELEVISION ATTN: OFFICER MANAGER OR AGENT 9600 PARKSIDE DRIVE KNOXVILLE TN 37922

MIDLAND FUNDING LLC ATTN: OFFICER MANAGER OR AGENT 8875 AERO DRIVE #200 SAN DIEGO CA 92123

MIDNIGHT VELVET ATTN: OFFICER MANAGER OR AGENT 1112 7TH AVENUE MONROE WI 53566-1364

NATIONWIDE CREDIT INC ATTN: OFFICER MANAGER OR AGENT PO BOX 26314 LEHIGH VALLEY PA 18002-6314

NORTHLAND GROUP ATTN OFFICER MANAGER OR AGENT PO BOX 129 THOROFARE NJ 08086-0129

PENN CREDIT CORP ATTN: OFFICER MANAGER OR AGENT PO BOX 988 HARRISBURG PA 17108-0988

PORTFOLIO RECOVERY ASSOC LLC ATTN OFFICER MANAGER OR AGENT PO BOX 12914 NORFOLK VA 23541

QUEST DIAGNOSTICS ATTN: OFFICER MANAGER OR AGENT PO BOX 740777 CINCINNATI OH 45274-0777

ROOSEVELT LAW CENTER ATTN: OFFICER MANAGER OR AGENT 1120 SYCAMORE AVE STE 2F VISTA CA 92081 SANTANDER CONSUMER BANKRUPTCY DEPT ATTN: OFFICER MANAGER OR AGENT PO BOX 560284 DALLAS TX 75356-0284

SUNTRUST BANK ATTN: OFFICER PO BOX 85092 RICHMOND VA 23286

TAYLOR LAW PLLC ATTN: OFFICER MANAGER OR AGENT PO BOX 436709 LOUISVILLE KY 40253-6709

TITLEMAX - BANKRUPTCY NOTICES ATTN: OFFICER MANAGER OR AGENT 15 BULL STREET #200 SAVANNAH GA 31401

TITLEMAX OF NASHVILLE ATTN: OFFICER MANAGER OR AGENT 3731 CLARKSVILLE PIKE NASHVILLE TN 37218

TRANSWORLD SYSTEMS INC ATTN: OFFICER MANAGER OR AGENT PO BOX 15609 WILMINGTON DE 19850

WEST ASSET MANAGEMENT ATTN: OFFICER MANAGER OR AGENT 2703 N HIGHWAY 75 SHERMAN TX 75090

WILSON & ASSOCIATES PLLC ATTN: OFFICER MANAGER OR AGENT 1521 MERRILL DR STE D220 LITTLE ROCK AR 72211